Issue 57: INSIDER'S EDGE: Spring Trends—Retroactive Coverage

Welcome back, Insiders! Medicaid Marge here with your spring fashion trend forecast.



Whatever your favorite era, there are some retro looks that are here to stay! One key trend not leaving Medicaid anytime soon? Retroactive coverage.

The Medicaid program has undergone some changes due to the ACA, but the rules governing retroactive coverage have stayed the same. Individuals applying for Medicaid can still apply for up to 3 months of retroactive coverage if they have outstanding medical bills.

If someone applies for Medicaid coverage using Maryland Health Connection (MHC), are they eligible to apply for retroactive coverage?

Yes!

What about a non-MAGI applicant who applies for benefits at a local health department (LHD) or local department of social services (LDSS)?

Yes!

The Details:

Regardless of its source, MHC, an LHD, or a LDSS, an application for benefits can be used for a retroactive coverage determination once it has been submitted and processed. Maryland Health Connection cannot be used to determine retroactive coverage eligibility at this time. Therefore, caseworkers should continue to use CARES to make retroactive coverage determinations. In some cases, not all of the information needed to make a retroactive determination may be included in an application. In that situation, caseworkers will need to ask an applicant for additional information to verify the individual's retroactive eligibility.

Questions? You know the drill, send them to dhmh.medicaidmarge@maryland.gov.